

EMERGENCY STATEMENT LETTER FOR PROGRAM PARTICIPATION IN BALI
WITH BALI INTERNSHIPS

I, [Parent's full name], am the parental authority of my child, [Participant's full name], born on [DD/MM/YYYY], traveling to Bali, Indonesia, to enroll in a voluntary work program under the organization Bali Internships.

I give my consent for the aforementioned child to travel to Bali, departing on [Departure Date] and returning on [Return Date].

During my child's stay [Participant's full name], in [Location], I agree to take full responsibility in case of any issue that may occur in destination (medically, financially and/or legally).

Any questions regarding this consent can be directed to me using the following contact information:

[Parent's full name]

[Address]

[City, State, Zip]

Phone:

Email:

Thank you for your assistance in this matter.

Sincerely,

[Signature and Full Name]